

Arkansas Water Well Construction Commission
101 East Capitol, Suite 350
Little Rock, AR 72201
(501) 682-3900

Information for Pump Installer Registration

An applicant for an Arkansas Water Well Pump Installer Registration Certificate must submit the following:

1. Proof of age. An applicant must submit a driver's license or other documentation illustrating that he is at least 18 years old.

2. Completed application form.

3. Proof of experience. Before an applicant is eligible to take any of the pump installer certification tests, the applicant must demonstrate proof of experience by meeting the requirements listed under either A, B, or C, below:

A. Applicant has completed the Commission's Pump Installer Apprenticeship Program by either:

1. Completing one year of the Commission's Pump Installer program and providing a letter from the apprentice's supervisor stating that the apprentice is ready to sit for examination; or
2. Applicant has completed three years of the Commission's Pump Installer Apprenticeship Program and has IRS W2 Wage and Tax Statement Forms demonstrating three years of employment under a licensed water well contractor.

B. Applicant holds or has held within the past ten years a valid Arkansas Water Well Pump Installer Certificate of Registration;

C. Applicant holds or has held a registration from another state similar to the type and class for which the person is applying , and the other state's program must be at least as rigorous as the Commission's Apprenticeship Program.

4. Testing fee of \$25. Please make check payable to Arkansas Water Well Construction Commission and mail to Arkansas Water Well Construction Commission, 101 East Capitol, Suite 350, Little Rock, AR 72201.

Review of application

The Commission will consider applications at its bi-monthly meetings. It generally meets on the first Friday in February, April, June, August, October, and December of each year. The Commission may delay consideration of applications received less than two weeks before a scheduled Commission meeting until the next meeting.

The Commission will send Applicant notice that it has reviewed his application and whether it has approved him for testing.

Examinations

Once approved, the Commission will mail study materials and a list of scheduled test dates to the Applicant. All exams will be given at the Commission's offices at 101 E. Capitol, Suite 350, Little Rock.

The exam will cover the Arkansas Water Well Construction Act, Ark. Code Ann. § 17-50-101 et seq; Water Well Construction Rules and Regulations; and general knowledge of pump installation. Questions are multiple choice, true and false, and fill in the blank. There will be 50 questions and a passing score is 70% or more. Commission staff will grade the exam and review missed questions with Applicants on the day of the exam.

If an applicant fails an exam, the exam can be retaken on another day. The Commission will not return testing fees to Applicants who fail the exam. Applicants who fail the exam must file a new application if the exam is not passed within 120 days after the Commission meeting at which the Applicant was originally approved to take the test.

Payment of Registration Fee

Once the applicant passes the exam, he must pay a \$125 registration fee. The Commission will consider the applicant certified upon passage of the exam or exams and payment of the \$125 registration fee.

NOTE: To legally install water well pumps within Arkansas, a registered pump installer must either hold an Arkansas Water Well Contractor Drilling and Pump Systems License or an Arkansas Water Well Contractor Pump Systems License or be employed by someone who holds such a license.

Example Letters

Letter from a Licensed Arkansas Water Well Contractor

Carson Drilling Company, Inc.
Plain Old, Arkansas 99999
Phone (501) 999-9999

December 16, 2010

Mr. J. Randy Young, Director
Arkansas Water Well Construction Commission
101 East Capitol, Suite 350
Little Rock, Arkansas 72201

Re: Patrick Phillip's Pump Installer Application

Dear Mr. Young:

I certify I know Patrick Phillips and believe him to be of good moral character. I have personal knowledge of his ability to install pumps and I believe he meets or exceeds all requirements for certification. I certify that he has completed the Arkansas Water Well Construction Commission's Apprenticeship Program for Water Well Pump Installers. I recommend he be issued a Registration Certificate and certified in pump installation.

I swear or affirm that the above statement is true.

Sincerely,

Casey Carson

Casey Carson
Doe Drilling Company, Inc.
Plain Old, Arkansas 99999
(501) 999-9999

ACKNOWLEDGMENT

STATE OF _____)
) ss
COUNTY OF _____)

Subscribed and sworn before me, a Notary Public, this ____ day of _____, ____.

NOTARY PUBLIC

MY COMMISSION EXPIRES

(S E A L)

Letter from a Customer

December 16, 2010

Mr. J. Randy Young, Director
Arkansas Water Well Construction Commission
101 East Capitol, Suite 350
Little Rock, Arkansas 72201

Re: Patrick Phillip's Water Pump Installer Application

Dear Mr. Young:

I certify I know Mr. Patrick Phillips and believe that he has good moral character.

On June 23, 2010, he helped to install a pump at my business at 1583 Anywhere Street, Plain Old, Arkansas. Mr. Phillips was employed by Doe Drilling Company, Inc. at the time and I am very pleased with their work.

Sincerely,

Kelly Customer

Kelly Customer
Rt. 1
Plain Old, Arkansas 99999
(501)999-9999

Arkansas Water Well Pump Installer

Registration Application

Incomplete or inaccurate information will delay processing of your application. For yes or no responses, circle the correct answer. Social Security Numbers will not be released to the public. An applicant must sign and notarize his application. Remit only testing fees with this application and make check payable to Arkansas Water Well Construction Commission (AWWCC). Attach a completed 10-year work history, W2s if applicable, or other proof of experience. In the absence of W2s, appearance before the Commission is required.

Full name: (First name, middle initial, last name)			Social security number:		
Street address:			Mailing address: (If not same as street address)		
City:			County:		
State:			Home phone number: ()		
Zip:			Work phone number: ()		
Date of birth (mm/dd/yy)	Height:	Weight:	Hair color:	Eye color	
Sex: Male Female	Ever convicted of a felony? Yes No	US citizen? Yes No	Resident of AR? Yes No		
Circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 Degrees:					
If you obtained a GED circle 12.					
Number of years of experience in water well construction:					
Have you ever had an Arkansas Water Well Registration Certificate or License revoked? Yes No					
Employed by: (Name of business)			Contractor number:		
Business street address:			City:		
State:	County:		Zip:		

For AWWCC use only

Amount	Receipt #	Issue Date	Reg. # D
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If you hold any water well pump installer registration certificates from other states, please list other states and applicable registration information. Also, list any professional licenses or credentials you hold (i.e. Professional Geologist or Master Plumber, etc.)

Please check the box to the left of letter A, B, C, or D below to indicate which experience requirements you believe you meet and the types of information submitted by you.

___ **A. Applicant** has completed one year of the Commission's pump installer apprenticeship program; and has a letter from the apprentice's supervisor stating that the apprentice is ready to sit for examination.

___ **B. Applicant** has completed three years of the Commission's pump installer apprenticeship program and has IRS W2 Wage and Tax Statement Forms demonstrating three years of employment under a licensed water well contractor.

___ **C. Applicant** holds or has held within the past ten years a valid Arkansas Water Well Pump Installer Registration Certificate.

___ **D. Applicant** holds or has held a registration from another state similar to the type and class for which the person is applying and has held this registration for a period equivalent to the apprenticeship program.

I hereby certify that the information remitted on this application and provided by me is true and correct; that I have knowledge of the Water Well Construction Act and regulations pertaining to water well construction; and that I have the level of experience I have indicated.

Witness: _____ Signed: _____

THIS FORM MUST BE NOTARIZED

State of _____

Subscribed and sworn to before me this _____

County of _____

day of _____, 20_____

My Commission expires: _____

Signed:

Employment History

List applicant's previous addresses, as well as employers' names, addresses and phone numbers for the last ten years.

Date: From _____ To _____

Applicant's address: _____

Employer's name _____

Supervisor: _____

Employer's address: _____

Employer's phone number: _____ (_____) _____

Position held/Job description: _____

For Office Use _____

Date: From _____ To _____

Applicant's address: _____

Employer's name _____

Supervisor: _____

Employer's address: _____

Employer's phone number: _____ (_____) _____

Position Held/Job description: _____

For Office Use _____

Make copies of this form and attach additional sheets if necessary.

Attach W2s or list of registration numbers for pump installation experience. Also, attach copies of other professional licenses (i.e. Geologist, Engineer, Electrical, Plumbing, etc.)